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system reform; and

for their own health care by:

IN THE HOUSE OF REPRESENTATIVES

HOUSE BILL NO. 529

BY HEALTH AND WELFARE COMMITTEE

1 2 3 4 5 6 7 8	AN ACT RELATING TO OVERSIGHT OF FEDERAL HEALTH CARE REFORM; AMENDING CHAPTER 90, TITLE 39, IDAHO CODE, BY THE ADDITION OF A NEW SECTION 39-9005, IDAHO CODE, TO PROVIDE LEGISLATIVE FINDINGS, TO PROVIDE OVERSIGHT OF FEDERAL HEALTH CARE REFORM AND TO DEFINE A TERM; AND AMENDING SECTION 67-456, IDAHO CODE, TO REVISE THE NAME OF A CERTAIN COMMITTEE, TO REVISE PROVI- SIONS RELATING TO MEETINGS OF THE SPECIAL OVERSIGHT COMMITTEE ON HEALTH CARE REFORM, TO REVISE THE DUTIES OF SUCH COMMITTEE AND TO REQUIRE CER- TAIN REPORTS.
10	Be It Enacted by the Legislature of the State of Idaho:
11 12 13	SECTION 1. That Chapter 90, Title 39, Idaho Code, be, and the same is hereby amended by the addition thereto of a NEW SECTION , to be known and designated as Section 39-9005, Idaho Code, and to read as follows:
14 15	39-9005. LEGISLATIVE FINDINGS OVERSIGHT OF FEDERAL HEALTH CARE RE-FORM. (1) The legislature finds that:
16 17 18	(a) The state has embarked on a rigorous process of implementing a strategic plan for health care reform pursuant to the recommendations of the governor's select committee on health care;
19 20	(b) The state will adopt free-market reforms to address Idaho's unique circumstances, provide affordable, accessible, quality care and mini-
21 22	<pre>mize federal interference; (c) Idaho is a leader in the nation for health care reform that in-</pre>
23 24 25	<pre>cludes: (i) Enrolling all children currently eligible for medicaid or the children's health insurance program (CHIP);</pre>
26 27	<pre>(ii) Creating a high insurance risk pool; (iii) Expanding medical residency and other educational opportu-</pre>
28 29 30	<pre>nities for health care professionals; (iv) Developing primary care medical homes; (v) Developing and using health data to control costs and qual-</pre>
31 32	<pre>ity; and (vi) Improving health through better managed care; and</pre>
33 34	(d) The federal patient protection and affordable care act of 2009, P. L. 111-148, as amended by the health care and education reconciliation
35 36 37	<pre>act of 2010, P. L. 111-152 (collectively referred to as PPACA): (i) Infringes on state powers; (ii) Imposes a uniform solution to a problem that requires differ-</pre>
37 38	ent responses in different states;

(iii) Threatens the progress Idaho has made towards health care

(iv) Infringes on the rights of citizens of this state to provide

- 1. Requiring a person to enroll in a third party payment system;
- 2. Imposing fines on a person who chooses to pay directly for health care rather than using a third party payer;
- 3. Imposing fines on an employer that does not meet federal standards for providing health care benefits for employees; and
- 4. Threatening private health care systems with competing government supported health care systems.
- (2) No Idaho department or agency may enforce or implement any portion of federal health care reform that is passed by the United States congress after March 1, 2010, unless the department or agency reports to and receives authorization from the special oversight committee on health care reform established in section 67-456, Idaho Code. Such report shall include, at minimum, the following information:
 - (a) The specific federal statute or regulation that requires the state to implement a federal reform provision;
 - (b) Whether the reform provision has any state waiver or options;
 - (c) What the reform provision requires the state to do and how it would be implemented;
 - (d) Who in the state will be impacted by adopting the federal reform provision or not adopting the federal reform provision;
 - (e) The cost to the state or citizens of the state to implement the federal reform provision; and
 - (f) The consequences to the state if the state does not comply with the federal reform provision.
- (3) Notwithstanding any decision of the special oversight committee on health care, the legislature may pass legislation specifically authorizing or prohibiting the state's compliance with, or participation in, federal health care reform.
- (4) For purposes of this section, "federal health care reform" means federal legislation or federal regulation that:
 - (a) Mandates an individual to purchase health insurance;
 - (b) Mandates a small employer to provide health insurance coverage for employees;
 - (c) Imposes penalties on small employers who do not provide health insurance for their employees;
 - (d) Expands the eligibility for the medicaid program or the children's health insurance program and passes the cost of that expansion to the state;
 - (e) Creates new insurance coverage mandates; or
 - (f) Creates a new government run, public insurance program.

SECTION 2. That Section 67-456, Idaho Code, be, and the same is hereby amended to read as follows:

67-456. SPECIAL <u>OVERSIGHT</u> COMMITTEE ON HEALTH CARE <u>REFORM</u>. (1) In order to maintain a degree of continuous oversight of rural and urban health care issues, there is hereby established a special legislative <u>oversight</u> committee on health care <u>reform</u>. The committee shall consist of five (5) members of the senate, three (3) from the majority party appointed by the

president pro tempore, and two (2) from the minority party appointed by the minority leader and five (5) members of the house of representatives, three (3) from the majority party appointed by the speaker of the house, and two (2) from the minority party appointed by the minority leader. The president pro tempore of the senate and the speaker of the house shall each appoint a co-chairman from among the appointed members. Appointments to the committee shall be for the term of office of the member appointed. If a vacancy occurs or exists, it shall be filled in a manner consistent with the appointment procedure set out in this section; except the appointment shall be for the remainder of the unexpired term. A committee member may be reappointed to the committee. The co-chairmen shall have authority to appoint ad hoc members of the general public for special projects and issues.

The committee shall have as a primary duty and responsibility the task of monitoring and reviewing all aspects of the health care delivery system in Idaho, including without limitation, delivery of rural health care services, organization of the state department of health and welfare, the health districts, health maintenance organizations, laws relating to the licensing of hospitals, nursing homes and other health care providers, and the federal programs involving or relating to health care services.

The director of the department of health and welfare shall provide all necessary staff support and services to the committee.

The committee shall report to the president pro tempore of the senate and the speaker of the house by not later than February 1 of each year on all matters that have come to its attention, and may report and make recommendations on any aspect of the health care delivery system in this state at any time.

Members of the committee shall be compensated from the legislative account on order of the president pro tempore of the senate or the speaker of the house at the rates applicable for committee members of the legislative council. The committee may meet not more than six (6) times in any calendar year as necessary during the fiscal year at the call of the chair, subject to approval of the president pro tempore of the senate and the speaker of the house.

The special committee shall cease to exist following its report to the Second Regular Session of the Fifty-third Idaho Legislature in 1995.

- (2) The committee shall provide legislative oversight, policy direction and recommendations for legislation with respect to the compliance with and implementation of any federal health care initiative, law or regulation including, but not limited to, the patient protection and affordable care act of 2009, P. L. 111-148, as amended by the health care and education reconciliation act of 2010, P. L. 111-152, (collectively referred to as PPACA) as it determines appropriate. The committee may also review existing rules and policies adopted pursuant to a federal health care initiative, law or regulation including, but not limited to, the PPACA and may recommend to the germane committees of the legislature the repeal of such rules and policies. The committee shall make decisions relating to the enforcement or implementation of federal health care reform by Idaho departments and agencies, as required in section 39-9005, Idaho Code.
- (3) The director of the department of insurance and the director of the department of health and welfare shall make periodic reports as requested by

- the oversight committee regarding the provisions of any federal health care initiative, law or regulation including, but not limited to, the PPACA, that
- have taken legal effect, or that may take legal effect, in Idaho.